

II. INTRODUCTION

Mission Statement:

The Lawrence County Health Council is to act as an independent advisory organization whose purpose is to facilitate the availability and affordability of quality health care within the South Central Tennessee Public Health Region.

Definition of Community Diagnosis:

A simple definition used by the North Carolina State Center for Health and Environmental Statistics of a community diagnosis is “a means of examining aggregate health and social statistics, liberally spiced with knowledge of the local situation in order to determine the health needs of the community.” By using this definition, we acknowledge that significant input from residents of the local area is essential to performing a community diagnosis effectively. Although a great deal of quantified health data can be obtained from the State, the process will only be successful if local citizens are fully involved and are comfortable with the eventual findings. This is why the formation and effective utilization of county health councils are vital in achieving accurate results.

History/Summary:

Lawrence County, Tennessee was the seventh county initiated to the Community Diagnosis process in the South Central Region. Community members formed the council on March 12, 1998. The initiating meeting was held at the Showring Grill in Lawrenceburg and was hosted and facilitated by the South Central Region’s Community Development staff.

Those present at the initiating meeting were given an overview of the Community Diagnosis process. The group was informed of the intent of the Department of Health to improve their assessment and planning by giving residents an opportunity to assess health problems at the local level. Everyone present was given the opportunity to become a member of the Lawrence County Health Council by indicating their interest on a questionnaire provided by the Community Development staff. They were also encouraged to nominate any community member who might be interested in serving on such a council. The Council elected to meet on the second Thursday of each month.

The first meeting was scheduled for April 8, 1998. At the July 9th meeting, the Council elected Jerry Geho, a minister and director of the Realities program, to serve as Chairman. Stanley Leech was elected vice-chair. Under the leadership of Mr. Geho, the Council completed their community diagnosis and began a community assessment. The Community Development staff analyzed and prepared health data from several sources for the review of the Health Council. A survey was distributed throughout the